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DECLARATION FOR UTILITY OR

Att rney Docket Number

DESIGN	First Named Invento	Isaiah W. Cox						
PATENT APPLICATION	COMPLETE IF KNOWN							
(37 CFR 1.63)	Application Number							
Declaration Declaration	Filing Date	08/01/2003						
Submitted OR Submitted after Initial	Art Unit							
with Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name							
As the below named inventor, I hereby declare that:								
My residence, mailing address, and citizenship are as stated below	w next to my name.							
I believe I am the original and first inventor of the subject matter wi	nich is claimed and for which	h a patent is sought on the invention entitled:						
Gap Diode Device								
(Title of the Invention)								
the specification of which								
is attached hereto								
OR was filed on (MM/DD/YYYY)	as United States A	oplication Number or PCT International						
Application Number and was amende	d on (MM/DD/YYYY)	(if applicable).						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disclose information which is material to applications, material information which became available between international filing date of the continuation-in-part application.	the filing date of the prior a	application and the national or PCT						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) of breeder's rights certificate(s), or 365(a) of any PCT international states of America, listed below and have also identified below, by breeder's rights certificate(s), or any PCT international application claimed.	application which designat checking the box, any for	ed at least one country other than the United reign application for patent, inventor's or plant						

Foreign Filing Date (MM/DD/YYYY) **Prior Foreign Application Priority Certified Copy Attached?** Country Number(s) **Not Claimed** YES NO Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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PTC/SB/01 (10-01)
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DECLARATION — Utility or Design Pat nt Application

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below							
Borealis Technical Limited			:				
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR :	A petition	has bee	n filed for this unsign	ned inventor			
Given Name Isaiah Watas (first and middle [if any])							
	08/01/2003						
Inventor's Signature	Inventor's						
			England	us			
London	0.040		_	Citizenship			
Residence: City	State		Country	Citationis			
Mailing Address 23545 NW Skyline Blvd	<u> </u>						
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City	TOTAL TAME		ZIP	Country			
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor							
Given Name Leri (first and middle [if any]) Tsakadze or Surname							
Inventor's Signature L. Tsaky Date							
			Georgia	Georgia			
Tbilisi	State	•	Country	Citizenship			
Residence: City State Country Citizenship							
Mailing Address 23545 NW Skyline Blvd							
North Plains	OR		97133-9204	us			
City	State		ZIP ·	Country			
Additional inventors are being named on the 1	_supplemental Addi	tional Inve	ntor(s) sheet(s) PTO/SB/	02A attached hereto.			

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PTO/SE/02A (11-00)
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
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Name of Additional Joint inventor, if any:				☐ A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]))			Family Nam	e or S	umame	
Avto			T	Tavkhelidze			
Inventor's Signature A. June						Date 08/01/2003	
Residence: City Thouses	State		ر	Georgia Country		Georgia Citizenship	
Mailing Address 23545 NW Skyline Blvd							
Mailing Address							
Chy North Plains	Sta	or OR		97133-9204 ZIP C	ountr	US	
Name of Additional Joint inventor, if any:							
Given Name (first and middle [if any])			\perp	Family Nam	e or S	urname	
Inventor's Signature			Pate			Date	
Residence: City	State			Country		Citizenship	
Mailing Address							
Mailing Address							
City	State			ZIP	Country		
Name of Additional Joint Inventor, if any:							
Given Name (first and middle [if any])			Family Name or Surname				
Inventor's Signature Date					Date		
Residence: City State		Country			Citizenship		
Mailing Address							
Mailing Address							
City State				ZIP Country			

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